TRANSMITTAL Filing Date FORM First Name

(to be used for all correspondence after initial filing)

Typed or printed name

Bruce L. White

Application Number 10/552,121

Filing Date 10/5/2005

First Named Inventor Tamas Hume

Art Unit 2854

Examiner Name Ren L. Yan

Attorney Docket Number 1376 - 053035

Date

December 29, 2008

Total Number of Pages in This Submission **ENCLOSURES** (check all that apply) After Allowance communication Fee Transmittal Form Drawing(s) Appeal Communication to Board Fee Attached Licensing-related Papers of Appeals and Interferences Appeal Communication to TC Petition Amendment / Reply (Appeal Notice, Brief, Reply Brief) Petition to convert to a Proprietary Information After Final Provisional Application Power of Attorney, Revocation Status Letter Affidavits/declaration(s) Change of Correspondence Address Other Enclosure(s) (please Terminal Disclaimer Extension of Time Request identify below): **RCE** Request for Refund Express Abandonment Request Information Disclosure Statement CD, Number of CD(s)_ Landscape Table on CD Remarks Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts Under 37 CFR 1.52 or 1.53 The Commissioner for Patents is hereby authorized to charge any additional fees or underpayment of fees under 37 CFR 1.16 and 1.17 to Deposit Account No. 23-0650 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT The Webb Law Firm Firm Name Signature Richard L. Byrne Printed Name Reg. No. 28498 Date December 29, 2008 CERTIFICATE OF TRANSMISSION / MAILING I hereby certify that this correspondence is being electronically transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: Signature

Effective on 12/08/2004.					Countate if Known				
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).					Complete if Known				
FEE TRANSMITTAL					ication Number	10/552,1			
For FY 2009					g Date	10/5/200 Tamas H			
Applicant claims small entity status. See 37 CFR 1.27					Named Inventor	Ren L. Y			
					niner Name		an		
TOTAL AMOUNT OF PAYMENT (\$) 405.00					Jnit	2854 1376 - 0	5202 <i>5</i>		
					rney Docket	13/0 - 0.	33033		
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order Other (please identify):									
Deposit Account Deposit Account Number: 23-0650 Deposit Account Name:									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17									
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.									
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)									
1. BASIC FILING, SEARCH, AND EXAMINATION FEES									
FILING FEES SEARCH FEES EXAMINATION FEES									
Small Entity Small Entity Small Entity									
Application Type		Fee (\$)	Fee (\$)	Fee (\$)	<u>Fee (\$)</u>	Fee (\$)	Fee	es Paid (\$)	
Utility	330	82	540	270	220	110	***************************************		
Design	220	110	100	50	140	70			
Plant	220	110	330	165	170	85	***************************************	·····	
Reissue	330	165	540	270	650	325			
Provisional	220	110	0	0	0	0			
2. EXCESS CLAIM FEES								Small Entity	
Fee Description Fee (\$)								<u>Fee (\$)</u>	
Each claim over 20 (including Reissues) 52								26	
Each independent claim over 3 (including Reissues) 220								110	
Multiple dependent cla			_				390	195	
<u>Total Claims</u> - :	<u>20 or HP</u> -	Extra Clai		<u>e (\$)</u> _	Fee Paid (\$)			e Dependent Claims	
HP = highest number of total claims paid for, if greater than 20.									
Indep. Claims -:	3 or HP	Extra Clai	ms Fe	ee (\$)	Fee Paid (\$)			PARTITION WILL SERVICE STREET	
-	=	=	x		=				
HP = highest number of independent claims paid for, if greater than 3.									
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under									
37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof.									
See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
								Fee Paid (\$)	
100 = / 50 = (round up to a whole number) x =									
4. OTHER FEE(S) Fees Paid (\$)									
Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): RCE								405.00	
SUBMITTED BY			, ,						
Signature	<i>J</i>	hard L	6 hy		Registration No. Attorney/Agent)	28498	Telephone	412-471-8815	
Name (Print/Type) Richard L. Byrne Date Decemb								ember 29, 2008	